

ORIGINAL

FEDERAL COMMUNICATIONS COMMISSION

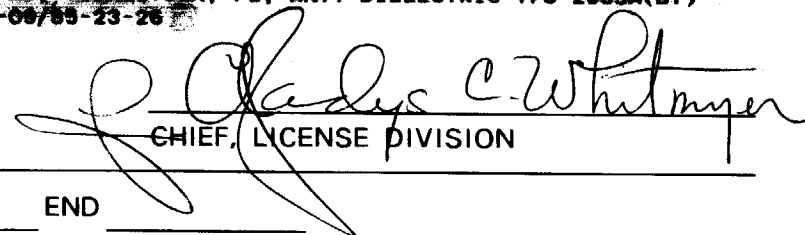
CLASS OF STATION TV

MEH

The following application is submitted for action by the Chief, Broadcast Bureau.

| ST | FILE NUMBER | CALL | APPLICANT AND LOCATION | NATURE OF APPLICATION |
|----|-----------------------|----------------|--|--|
| FL | BPCT -910617KE N/M | NEW CHAN-46 | SUNKISSED BROADCASTING, INC. PANAMA CITY BEACH FL | CP FOR A NEW COMMERCIAL TV STN. TO SERVED PANAMA CITY BEACH FL CH-46 ERP VIS: 2385 KW; HAAT: 277.3 METERS TL: APPROX 3.2 KM S OF CRYSTAL LAKE, FL, (30-25-20 85-42-14); ANT: BOGNER (CELLWAVE) B24 (G)H, (DA) (BT). ROBERT S. STONE, ATTY. *AMENDED 02-05-92: TO CHANGE THE ERP(VIS): 5.000KW; HAAT: 277.3 METERS; TL: 1200 SCRTS PERMIT NO. YOUNGSTOWN, FL; ANT: DIELECTRIC TFW-25JSM(BT) 30-21-08/85-23-26 |

LICENSE EXPIRATION DATE _____


CHIEF, LICENSE DIVISION

RECOMMENDATION: GRANT() CONSTRUCTION DATES, START _____ END _____
CONTESTED () UNCONTESTED ()

APPROVED _____

FOR CHIEF, BROADCAST BUREAU

F.C.C.-WASHINGTON, D.C.

Approved by OMB
3060-0440
Expires 2/28/93

FEDERAL COMMUNICATIONS COMMISSION
FEE PROCESSING FORM

FOR
FCC
USE
ONLY

FCC/MELLON MAR 06 1992

03-09-92 8170342 002

Please read instructions on back of this form before completing it. Section I MUST be completed. If you are applying for concurrent actions which require you to list more than one Fee Type Code, you must also complete Section II. This form must accompany all payments. Only one Fee Processing Form may be submitted per application or filing. Please type or print legibly. All required blocks must be completed or application/filing will be returned without action.

SECTION I

APPLICANT NAME (Last, first, middle initial)

Sunkissed Broadcasting, Inc.

MAILING ADDRESS (Line 1) (Maximum 86 characters - refer to instruction (2) on reverse of form)

3017 Piedmont Road, N.E., Suite 200

MAILING ADDRESS (Line 2) (If required) (Maximum 86 characters)

CITY

Atlanta

STATE OR COUNTRY (If foreign address)

Georgia

ZIP CODE

30305

CALL SIGN OR OTHER FCC IDENTIFIER (If applicable)

910617KE

Enter in Column (A) the correct Fee Type Code for the service you are applying for. Fee Type Codes may be found in FCC Fee Filing Guides. Enter in Column (B) the Fee Multiple, if applicable. Enter in Column (C) the result obtained from multiplying the value of the Fee Type Code in Column (A) by the number entered in Column (B), if any.

| (A) | (B) | (C) | | | | | | | | | | | |
|---|-------------------------------|--|------------------|--|--|--|--|--|--|---|-------------|--|--|
| FEE TYPE CODE | FEE MULTIPLE (if required) | FEE DUE FOR FEE TYPE CODE IN COLUMN (A) | FOR FCC USE ONLY | | | | | | | | | | |
| (1) <table border="1"><tr><td>M</td><td>W</td><td>T</td></tr></table> | M | W | T | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | <table border="1"><tr><td>\$ 6,760.00</td></tr></table> | \$ 6,760.00 | <table border="1"><tr><td></td></tr></table> | |
| M | W | T | | | | | | | | | | | |
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| \$ 6,760.00 | | | | | | | | | | | | | |
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SECTION II — To be used only when you are requesting concurrent actions which result in a requirement to list more than one Fee Type Code.

| (A) | (B) | (C) | | | | | | | | | | | |
|---|-------------------------------|--|--|--|-------------|--|------------------|----------|--|--|----|--|--|
| FEE TYPE CODE | FEE MULTIPLE (if required) | FEE DUE FOR FEE TYPE CODE IN COLUMN (A) | FOR FCC USE ONLY | | | | | | | | | | |
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| ADD ALL AMOUNTS SHOWN IN COLUMN C, LINES (1) THROUGH (5), AND ENTER THE TOTAL HERE. THIS AMOUNT SHOULD EQUAL YOUR ENCLOSED REMITTANCE. | | | <table border="1"><tr><td>TOTAL AMOUNT REMITTED WITH THIS APPLICATION OR FILING</td></tr><tr><td>\$ 6,760.00</td></tr></table> | TOTAL AMOUNT REMITTED WITH THIS APPLICATION OR FILING | \$ 6,760.00 | <table border="1"><tr><td>FOR FCC USE ONLY</td></tr><tr><td>6,760.00</td></tr></table> | FOR FCC USE ONLY | 6,760.00 | | | | | |
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| 6,760.00 | | | | | | | | | | | | | |

INSTRUCTIONS FOR COMPLETING FEE PROCESSING FORM, FCC FORM 155, March 1991

- (1) **"Applicant Name"** - Enter the name (last, first, middle initial) of the applicant as it appears on the original application or filing being submitted with this Fee Processing Form. If company, enter name which is used commercially.
- (2) **"Mailing Address (Line 1)"** - Enter the street address or post office box number to which the applicant wishes correspondence sent.
- (3) **"Mailing Address (Line 2)"** - This line may be used for further identification of the address if additional space is required.
- (4) **"City"** - Enter the name of the city associated with the given street address.
- (5) **"State or Country"** - Enter the appropriate two-digit state abbreviation as prescribed by the U.S. Postal Service. If address is foreign, enter the appropriate country name here.
- (6) **"ZIP Code"** - Enter the appropriate five or nine-digit ZIP code prescribed by the U.S. Postal Service.
- (7) **"Call Sign or Other FCC Identifier"** - Enter an applicable call sign or unique FCC identifier, if any, as shown on your attached application or filing. If applying for a service affecting more than one call sign, enter one call sign only.
- (8) **Column (A), "Fee Type Code"** - Enter correct Fee Type Code(s) from the appropriate Fee Filing Guide. Only one Fee Processing Form may be submitted per application or filing. Inaccurate or erroneous Fee Type Codes may result in your application or filing being returned to you without further processing.
- (9) **Column (B), "Fee Multiple"** - Certain applications and filings may request action with respect to more than one station, license, frequency, or party and can be submitted together with one check if they meet specific conditions. This column is used only if a multiple, i.e., two or more, is being applied for. Examples of when this would be used are renewing more than one call sign, frequency, station, or the transfer of control of more than one station. Refer to the appropriate Fee Filing Guide for additional information.
- (10) **Column (C), "Fee Due For Fee Type Code in Column (A)"** - Enter in this block the amount of the fee associated with the Fee Type Code shown in Column (A) (times (x) the fee multiple, if required).
- (11) **"Total Amount Remitted With This Application or Filing"** - Enter the total of lines (1) through (5) of Column (C). This amount should equal the amount of your check or money order. We will not accept multiple checks.

HOW TO SUBMIT APPLICATIONS AND FILINGS

- o Each application or filing should be assembled with the Fee Processing Form, FCC Form 155, stapled to the top of the application with the check placed on top of the Fee Processing Form. **DO NOT STAPLE THE CHECK TO THE APPLICATION OR FEE PROCESSING FORM, FCC FORM 155.** Required copies of applications should be clearly identified as "duplicate copy" and placed behind the original package. **"Stamp and receipt" copies should be placed on top of the original package and CLEARLY identified as return copies.** Extraneous material and extra copies should be avoided at all times. Failure to follow these instructions will delay the processing of your submission.
- o Completed applications or filings should be mailed to the proper address shown in the Fee Filing Guide for the particular service for which you are applying or making a filing. **All applications and filings must be properly addressed to the appropriate P.O. box number,** even if hand delivered to the address listed below. Applications received before midnight on a normal business day will receive that day's date as the receipt date. Deliveries made after midnight on Fridays will not be "officially" receipted until the next Monday. Applications received on weekends and government holidays are dated the next regular business day.
- o A single check, bank draft or money order made payable to the Federal Communications Commission and denominated in U.S. dollars and drawn upon a U.S. financial institution must be included with each application or filing requiring a fee. No postdated, altered or third-party checks will be accepted. Do not send cash.
- o Parties hand delivering applications or filings may receive dated receipt copies by presenting copies of the applications or filings to the acceptance clerk at the time of delivery. **Receipts will be provided for mail-in applications or filings if an extra copy of the application or filing is provided along with a self-addressed stamped envelope. Only one piece of paper per application filing will be stamped for receipt purposes.**

REMEMBER

- o A separate completed Fee Processing Form is required with each application or filing except in certain circumstances. Please refer to the appropriate Fee Filing Guide for additional information.
- o A wrong Fee Type Code or incorrect remittance may result in your application or filing being returned without processing, or result in the dismissal of your application or filing. Please ensure that FEE TYPE CODES are correct and that your check or money order equals the amount shown in the TOTAL AMOUNT REMITTED WITH THIS APPLICATION OR FILING block before submitting your application or filing.
- o If you have any questions completing this form, please call the Fees Hotline, 202/632-FEES.

FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 1, Subpart G of the Commission's rules authorize the FCC to request the information on this form. The information requested is required in order to obtain a license or authorization from the Commission. The purpose of the information is to provide a means to link a fee payment to a specific invoice, application or filing. The information will be used by the Commission to maintain data concerning fees paid to the Commission, for internal financial control, audit, and reporting purposes. Information requested on this form will be available to the public. Your response is required to obtain a license or other authorization from the Commission.

Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Federal Communications Commission, Office of Managing Director, Washington, DC 20554, and to the Office of Management and Budget, Paperwork Reduction Project (3060-0440), Washington, DC 20503.

**This address is for hand carry
or courier delivery only:**

Federal Communications Commission
c/o Mellon Bank
Three Mellon Bank Center
525 William Penn Way
27th Floor, Rm. 153-2713
Pittsburgh, Pennsylvania
(Attention: Wholesale Lockbox Shift Supervisor)

ROBERT S. YOUNG, JR.
LINDSAY YOUNG
ROBERT S. MARQUIS
ROBERT S. STONE
J. CHRISTOPHER KIRK
MARK K. WILLIAMS
JANIE C. PORTER
GREGORY E. ERICKSON
R. SCOTT ELMORE

McCAMPBELL & YOUNG

A PROFESSIONAL CORPORATION
ATTORNEYS AT LAW

2021 PLAZA TOWER
POST OFFICE BOX 550
KNOXVILLE, TENNESSEE 37901-0550

(615) 637-1440
TELECOPIER (615) 546-9731

H. H. McCAMPBELL, JR. (1905-1974)
F. GRAHAM BARTLETT (1920-1982)

ALSO ADMITTED IN
VIRGINIA:

ROBERT S. MARQUIS

March 5, 1992

VIA FEDERAL EXPRESS

Federal Communications Commission
c/o Mellon Bank
3 Mellon Bank Center
525 William Penn Way
27th Floor, Room 153-2713
Post Office Box 358170
Pittsburgh, PA 15259-0001

ATTN: Wholesale Lockbox Shift Supervisor

Re: Sunkissed Broadcasting, Inc.
BPCT-910617KE
Panama City Beach, Florida (Channel 46)

Gentlemen:

We submit herewith on behalf of our client, Sunkissed Broadcasting, Inc., the applicant's hearing fee for the above-referenced application for authority to construct and operate a new television broadcast station to serve the community of Panama City Beach on Channel 46. Also enclosed is the applicant's fee processing form, FCC Form 155, which accompanies the applicant's hearing fee payment. The applicant's hearing fee is submitted in response to the Commission's Public Notice, Report No. B-159, released December 20, 1991, which establishes March 9, 1992 as the deadline for payment of hearing fees by all applicants for Panama City Beach, Florida Channel 46.

Pursuant to the above Public Notice, an original and two copies of the instant transmittal letter are submitted. Also enclosed is an additional "date-stamped" copy of the applicant's fee processing form and our transmittal letter, which we would appreciate your returning to the undersigned in the enclosed postage paid, self-addressed envelope after the copy has been date stamped by your office.

March 5, 1992
Page 2

Should you or any members of your staff have questions concerning the enclosed, please contact the undersigned for clarification. Thank you for your cooperation in this matter. With kind regards, I remain

Very sincerely yours,

A handwritten signature in cursive script, reading "Robert S. Stone". The signature is written in dark ink and is positioned above the printed name and title.

Robert S. Stone
Counsel to Sunkissed Broadcasting, Inc.

RSS/dlb
Enclosures

cc: Sunkissed Broadcasting, Inc.